			INCIDE	NI NUMBER	K	REPORT NUMBER		KEFOKTTITE			
TRAFFIC ACCIDENT REPORT				173244600012		17324	4600012 \	INITIAL			
AUTHORITY:5 U.S.C. PRINCIPAL PURPOSE supervisors, security pr proper legal and admin ROUTINE USES: Infor- criminal prosecution or DISCLOSURE IS VOL	E: Used to recolice, NCIS spanistrative action may be called a court action.	cord information becial agents, et on is taken. be disclosed to lo	C. 3103 and and details oc. Used to proceed, county, septracted from	EO 9397 f criminal activ ovide information state and feder m this form ma	on to the appropria ral law enforcements by he used in other	ate individu	uals within L igatory auth riminal and/o	orities for invest or civil proceedir	igation and possible		
ADMINISTRATIVE				441							
Incident Subject : MC	TOR VEHI	CLE ACCIDE	NT (POV/PO	OV)							
Date_Received Time Received Inc 25-JAN-2017 0826 Inc			Incident Red By Rad		Start Date / Time of Incident 25-JAN-2017 0827			End Date / Time of Incident 25-JAN-2017 0827			
Type of Accident Vehicle-Vehicle			nber Vehicles 2	2 0 Number Killed			Severity 0 Number Injured Property Damage				
Weather : Cloudy					<u>Lighting</u> : Day	light	~				
LOCATION											
On/Off Base Road or Street on Which Accident Occurred City, State/Territory, Zip/Postal Code, Count KITTERY, ME 03904 USA						ode, Country JSA					
25 Feet N of Nearest Intersecting Street, Highway, or Other Permanent Landmark Identified as INFRONT OF GATE ONE											
Kind of Locality : Highway/Road/Alley (includes street)											
VEHICLE(S)											
Vehicle # 1	<u>Year</u> 2012	<u>Color</u> White	Mode E15		Body Style Make Van FORD			Owner Name RED THREAD OPERATIONS			
<u>License Plate</u> (b)(6) <u>DOD Decal</u> N/A <u>Vehic</u>				<u>Veh</u> icle Ident	(b)(6) Ownership Type Private/Personal						
Insurance Policy Number (b)(6) GREAT NORTHE				nsurance Company HERN INSURANCE COMPANY				Insurance Expires On 01-JAN-2018			
Other Identifying Mar	ks :RED TF	RHEAD OPER	ATIONS DE	CAL ON SIE	DE OF VEHICLE						
Traffic Control/Road C	onditions										
<u>Driving Lanes</u> : Parking Lot				Cha	Character : Up-Grade						
Surface : Blacktop				Con	Conditions : Wet						
Road Defects : No Defects				Trat	Traffic Control : No Traffic Signal						
Contributing Circumsta	ances and Dri	ver Actions									
<u>Direction Headed</u> : N <u>Vehicle Defects</u> :											
<u>Lawful Speed</u> : 10 <u>Estimated Speed at Impact</u> : 0					Estimated Speed when Danger was First Noticed : 0						
Distance Traveled after Impact: 0 Estimated Distance when Danger was First Noticed: 0											
Vehicle Damage											
Severity of Damage : Functional Damage Areas Damaged :					7						
Towed By :				Tow	ved To :						
Vehicle # 2	<u>Year</u> 2016	<u>Color</u> White	<u> </u>	Model TR	Body Style Tractor Traile		lake DLVO		ner Name /AN GROUP INC		
License Plate (b)(6)		DOD Decal N/A		<u>Ve</u> hicle Ide	ntification Numb (b)(6)	er (<u>VIN)</u>	Ownership Type Private/Personal				
Insurance Policy Number (b)(6)		L	Insura OVE INSUI	Insurance Company INSURANCE COMPANY			Insurance Expires On				

Other Identifying Marks	<u>s</u> ;						
Traffic Control/Road Cor							
Driving Lanes : Parking			Character: Up-Grade				
Surface : Blacktop			Conditions : Wet				
Road Defects : No Defe	ects		Traffic Control : No Traffic Signal				
Contributing Circumstan							
Direction Headed : N		Vehicle Defects : N	None Noted				
Lawful Speed : 10	Estimated S	peed at Impact : 2	Estimated Speed when Danger was First Noticed : 2				
Distance Traveled after			e when Danger was First	Notice	<u>ed</u> : 0		
Vehicle Damage							
Severity of Damage : F	unctional Damage	Areas Damaged :	7 - Rear Left				
Towed By :			Towed To:				
DRIVER(S)					Vehicle 1		
DRIVER #1			ID Num		Rank		
Name (b)(6)			(b)(6)				
Branch of Service	Personnel Type CIVILIAN	Status CIVILIAN - Other	Date of Birth (b)(6)	Place	of Birth (b)(6)		
Home Telephone (b)(6)				Telephon <u>e</u> D)(6)			
Address	(b)(6)						
Organization	(b)(6),			UIC / RUC			
RED THREAD OPERATIONS							
Drivers License (b)(6)			Limitations on License None		Oriving Experience		
Seat Belt Use Both Used	Seat Occupied 1	Chemical Test Given No	Chemical Test Refused No	BAC PCT			
Injury Type(s):							
Contributing Circumstances and Driver Actions							
<u>Citation Number</u> <u>Driver Actions</u> Parked							
DRIVER #2 Vehicle 2					Vehicle 2		
Name (b)(6)		(b)(6)		Rank			
Branch of Service	Status CIVILIAN - Other	Date of Birth (b)(6)		of Birth (6)			
Home Telephone (b)(6)			Work	Telephone (b)(6)			
Addross	(b)(6)						
Organization		UIC / RUC					
Drivers License		Limitations on License CDL CLASS A		Driving Experience			
Seat Belt Use Both Used	Seat Belt Use Seat Occupied Chemical Test Given Chemical Test Refused BAC PCT						
Injury Type(s):							
Contributing Circumstances and Driver Actions Citation Number Driver Actions							
Citation Number		Backing, Making Right Turn					
OCCUPANTS(S)							
PEDESTRIAN(S)			-				

COMPLAINANT(S)										
OFFENSE(S)										
PROPERTY										
PROPERTY - NARCOTIC(S)										
WITNESS(S)										
VICTIMS(S)										
VICTIM Victim Type DD2701 Issued Individual (b)(6)								ed		
Name										
Branch of Service	Personnel Type CIVILIAN	Status CIVILI	AN - Other	Date o		Place of ME, Un	ace of Birth E, United States			
Sex : Male	Race : White		ty : Not Hispan		(b)(6) ME, United States Resident of Jurisdiction : Resident					
Address (b)(6)										
Organization RED THREAD OPERA	TIONS			UIC / F		Wo	rk Teleph (b)(6)	one		
			DDITIONAL VIC	TIM INFO	RMATION					
Offense(s) Committed Ac		:								
(b)(6)	tranger									
Aggravated Assault Circu	umstances :				-	- He				
Injury Type(s):										
SPONSOR(S)										
SUSPECT(S) / ARRESTEE(S)										
SUSPECT					1					
Name (b)(6)	-14-				ID Num (b)(6	5)	Rank			
(b)(6) Branch of Service Personnel Type Status CIVILIAN CIVILIAN - Other					Date of Birth (b)(6) Place of Birth (b)(6)					
<u></u>					(2)(0)	W				
(b)(6)				-	UIC / RUC			Work Telephone		
Organization								(b)(6)		
Maiden Name and Known	n Alias(es):	ADDITIO	NAL CHORECT	ADDECT	E INFORMAT	TION				
Offense(s) Committed by	This Suspect/Arr		NAL SUSPECT /	ARRESTI	E INFORMAT	ION				
Offense(s) Committee by	This odspectoral		JSPECT / ARRE	STEE DES	CRIPTION					
Sex Race Ethnicity Hispanic Resident of Jurisdiction						ent of Jurisdiction				
Hair Color Black	Eye Color Brown	Height (Inches) 68			<u>ight (lbs.)</u> <u>Be</u>		Build um	<u>Dexterity</u> Right-Handed		
Hair Type(s): Short					Facial Hair : C			lean		
Complexion : Clear					Appearance : Neat					
Attire : Casual Attire Speech : Accent Demeanor : Polite										
IDENTIFYING MARKS										
Type Location Description										
ARRESTEE INFO										
Date Arrested : Type of Arrest : Multiple Clearance : Disposition of Juvenile :										
Multiple Clearance :										

Suspect Was Armed With:
ADDITIONAL POLICE OFFICERS
NARRATIVE
At approximately 0830, January 25, 2017, (b)(6) was dispatch to the commercial vehicle inspection station for a minor vehicle accident. (b)(6) arrived on scene at approximately 0832.
Upon arrival (b)(6) noticed a white tractor trailer truck (b)(6) blocking the outbound lane of traffic at Gate One. (b)(6) approached the driver (b)(6) and he informed him that he struck a vehicle while backing his tractor trailer into a parking spo
(b)(6) spoke to the driver of the second vehicle involved (b)(6) stated that his company van (b)(6) was struck while the tractor trailer was backing.
(b)(6) gathered all information needed to conduct an accident report. Both parties were very polite and stated that due to all the vehicles parked and moving in the parking lot, the Ford may have been overlooked by the tractor trailer.
There was some conflicts in both parties (b)(6) stated his car was stationary at the time of impact, (b)(6) stated that (b)(6) vehicle was in motion. Damage on the tractor trailer included; minor scuff/ scratches on the driver side bumper of the trailer. The damage of the ford included; 1 ½ foot gash above passenger side headlight/ quarter panel, broken plastic surrounding passenger side headlight/directional, 2-3 inch gash on left side of hood above headlight, passenger side bumped pushed in approximately 1 foot with long scratches in it. Based on the verbal statements provided by both parties, and lack of witnesses. Neither story could be collaborated Both parties have valid insurance and valid registration.
ENCLOSURE(S)
ENCL# DESCRIPTION
REPORTING/APPROVING OFFICIALS
Reporting Official Date (b)(6) 02-MAY-2017 (b)(6) Date 02-MAY-2017 (b)(6) Date 02-MAY-2017 (b)(6) PINAL APPROVED ON 02-MAY-2017
DISTRIBUTION
Referred To/Assumed By :
Distribution :